2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2012
Secretary of State

DOCUMENT# 617999

Entity Name: KAUFMAN, LIPKIN, AND RAILEY, M.D., P.A.

Current Principal Place of Business:

8399 W. OAKLAND PK. BLVD.
SUITE C
FORT LAUDERDALE, FL 33351 US

New Principal Place of Business:

Current Mailing Address:

8399 W. OAKLAND PK. BLVD.
SUITE C
FORT LAUDERDALE, FL 33351 US

New Mailing Address:

FEI Number: 59-1907430 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LIPKIN, STEPHEN
8399 W. OAKLAND PK. BLVD.
SUITE C
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: KAUFMAN, NORMAN P
Address: 8399 W. OAKLAND PARK BLVD-STE C
City-St-Zip: FORT LAUDERDALE, FL 33351 US

Title: TD
Name: LIPKIN, STEPHEN M TD
Address: 8399 W. OAKLAND PARK BLVD-STE C
City-St-Zip: FORT LAUDERDALE, FL 33351 US

Title: VP
Name: RAILEY, DEAN VP
Address: 8399 W. OAKLAND PARK BLVD-STE C
City-St-Zip: FORT LAUDERDALE, FL 33313 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NORMAN KAUFMAN MD PRES 02/06/2012

Electronic Signature of Signing Officer or Director Date